PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/550014

CLAIMS AS FILED - PART I												_
			(Column 1)		(Column 2)			SMALL EN	TITY	OR	OTHER SMALL	
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE
BAS	IC FEE		SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXA	MINATION FE	E	Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		1 1	ther situations = \$ 100 / \$ 200		EXAM. FEE	 	1	EXAM. FEE	
SEARCH FEE			All other situations (ie. No Search Rpt.) = \$ 250 / \$ 500		U.S. is i	ISA = \$50 / \$ 100 other countries = \$ 200 / \$ 400		SEARCH FEE	<u> </u>		SEARCH FEE	900 400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		1	/ 50 =		X \$ 125 =	<u> </u>	1	X \$ 250 =	7 00
TOTAL CHARGEABLE CLAIMS			/ 0 minus 20 =		*			X \$ 25 =		OR	X \$ 50 =	
IND	PENDENT CL	AIMS	/ minus 3 =		*			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPENI	DENT CLAIM PRE	SENT		l			+ \$ 180 =		OR	+ \$ 360 =	· ·
* If	the difference	in column 1 is l	ess than zero, enter "0)" in co	olumn 2		TOTAL		OR	TOTAL	900
CLAIMS AS AMENDED - PART II											700	
	<u>'</u>	(Column 1)	AMENDED	(Colur	mn 2)	nn 2) (Column 3)		SMALL ENTITY		OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT (CLAIM		Ī	+ \$ 180 =		OR	+ \$ 360 =	
							L	TOTAL ADDIT. FFF		OR	TOTAL ADDIT.	
		(Column 1)		(0.1	_,			•			rre [
_		CLAIMS		(Colun		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		= .		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ſ	+ \$ 180 =		OR	+ \$ 360 =	
· ·								TOTAL ADDIT: FFF		OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".												
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875 (Rev. 02/2005)												